

<b>Reference:</b>	FOI.13090.23
<b>Subject:</b>	Cancer treatments
<b>Date of Request:</b>	9 November 2023

**Requested:**

1. How many patients were treated in the past 3 months for gastric and gastro-oesophageal junction cancer (any stage) with:
  - CAPOX (Capecitabine with Oxaliplatin)
  - FOLFOX (Folinic acid, Fluorouracil and Oxaliplatin)
  - Lonsurf (Trifluridine - tipiracil)
  - Nivolumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)
  - Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)
  - Any other systemic anti-cancer therapy
  - Palliative care only
2. How many patients were treated in the past 3 months for Oesophageal cancer (any stage) with:
  - Nivolumab monotherapy or combination with Ipilimumab
  - Nivolumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)
  - Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)
  - Platinum and Fluoropyrimidine based combination treatments (Cisplatin or Oxaliplatin with 5-Fluorouracil or Capecitabine)
  - Any other systemic anti-cancer therapy
  - Palliative care only
3. How many patients were treated in the past 3 months for ovarian cancer (any stage) with:
  - Paclitaxel in combination with a platinum-based compound
  - Platinum-based therapy alone (cisplatin or carboplatin)
  - Bevacizumab in combination with paclitaxel and carboplatin
  - Olaparib
  - Olaparib + Bevacizumab
  - Niraparib
  - Rucaparib
4. If data for HRD (homologous recombination deficiency) testing is available, please provide how many HRD positive ovarian cancer patients were treated in the last 3 months with:
  - Olaparib
  - Olaparib + Bevacizumab
  - Niraparib
  - Other treatments

5. Does your trust participate in any clinical trials for the treatment of ovarian cancer? If so, please provide the name of each trial along with the number of patients taking part.

**Response:**

Hywel Dda University Health Board (UHB) is unable to provide you with all of the information requested, as it is estimated that the cost of answering your request would exceed the “appropriate limit” as stated in the Freedom of Information Act 2000 and the Data Protection (Appropriate Limit and Fees) Regulations 2004. The “appropriate limit” represents the estimated cost of one person spending 18 hours (or 2½ working days) in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

In order to provide you with the data requested for palliative care for questions 1 and 2, the UHB would need to undertake a manual trawl of the medical records of patients that are receiving palliative care, to identify any information that would fulfil your request, as this is not recorded centrally.

The UHB is therefore applying an exemption under Section 12 of the Freedom of Information Act 2000 (FoIA), which provides an exemption from a public authority’s obligation to comply with a request for information where the cost of compliance is estimated to exceed the appropriate limit.

However, under section 16 of the FoIA, the UHB has a duty to provide advice and assistance. Therefore, the UHB provides the accessible information it holds below.

1. The UHB provides, within the table below, the number of gastric and gastro-oesophageal junction cancer patients that have received the medications listed, as recorded on the ChemoCare system, during the period 1 August to 31 October 2023.

Medication	Number
CAPOX (Capecitabine with Oxaliplatin)	0
FOLFOX (Folinic acid, Fluorouracil and Oxaliplatin)	*
Lonsurf (Trifluridine - tipiracil)	*
Nivolumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)	0
Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)	0
Other active systemic anti-cancer therapy	6
Palliative care only	Section 12 exemption applied

2. The UHB provides, within the table below, the number of oesophageal cancer patients that have received the medications listed, as recorded on the ChemoCare system, during the period 1 August to 31 October 2023.

Medication	Number
Nivolumab monotherapy or combination with Ipilimumab	*
Nivolumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)	*
Pembrolizumab in combination with Platinum (Cisplatin or Oxaliplatin) and Fluoropyrimidine (5-Fluorouracil or Capecitabine)	6

Platinum and Fluoropyrimidine based combination treatments (Cisplatin or Oxaliplatin with 5-Fluorouracil or Capecitabine)	6
Other active systemic anti-cancer therapy	9
Palliative care only	Section 12 exemption applied

3. The UHB provides, within the table overleaf, the number of ovarian cancer patients that have received the medications listed, as recorded on the ChemoCare system, during the period 1 August to 31 October 2023.

Medication	Number
Paclitaxel in combination with a platinum-based compound	16
Platinum-based therapy alone (cisplatin or carboplatin)	12
Bevacizumab in combination with paclitaxel and carboplatin	*
Olaparib	*
Olaparib + Bevacizumab	*
Niraparib	0
Rucaparib	0

Where the figures in the tables have been replaced with an asterisk (\*), the UHB is unable to provide you with the exact number of patients due to the low numbers of cases (less than 5), as there is a potential risk of identifying individuals if this was disclosed. The UHB is therefore withholding this detail under Section 40(2) of the FoIA. This information is protected by the Data Protection Act 2018 (DPA)/UK General Data Protection Regulations (GDPR), as its disclosure would constitute unfair and unlawful processing and would be contrary to the principles and articles of the UK GDPR. This exemption is absolute and therefore there is no requirement to apply the public interest test.

In reaching this decision, the DPA and UK GDPR define personal data as data that relates to a living individual who can be identified solely from that data or from that data and other information, which is in the possession of the data controller.

4. The UHB confirms that it does not undertake Homologous Recombination Deficiency (HRD) testing.
5. The UHB confirms that it is not currently participating in any clinical trials for the treatment of ovarian cancer.